

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			12/22/94
O.I.P.E. CLASSIFIER		8	12-30-99
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW		10459.1	1-13-00

## INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral) ... Canceled      A ..... Appeal  
 ÷ ..... Restricted      0 ..... Objected

Claim	Final	Original	Date
1	✓	✓	12/22/94
2	✓	✓	12/22/94
3	✓	✓	12/22/94
4	✓	✓	12/22/94
5	✓	✓	12/22/94
6			
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10	✓	✓	12/22/94
11	0	0	12/22/94
12	✓	✓	12/22/94
13	✓	✓	12/22/94
14	✓	✓	12/22/94
15	0	0	12/22/94
16	N	N	12/22/94
17	✓	✓	12/22/94
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24	✓	N	
25	M	N	
26	✓	✓	12/22/94
27	✓	✓	12/22/94
28	✓	✓	12/22/94
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If more than 150 claims or 10 actions  
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Claim	Final	Original	Date
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Claim	Final	Original	Date
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